M21000015473

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(200,000)	
(Document Number)	
(Socialism Names)	
Contification of Status	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
Q. S ILAS	
MAR 2.2 2022	

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SECRETARY OF STATE
SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: ZAC DEVELOPMENT	LLC	
Name of Limited Liability Company		
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office Change and fee(s)	are submitted for filing.	
Please return all correspondence concerning this matter to the follow	ving:	
Zachary Kaplan Name of Person		
ZAC DEVELOPMENT LLC		
Firm/Company		
3495 LOCUST AVE		
Address		
WANTAGH, NewYORK 11793		
City/State and Zip Code	0.000	
zacdevelopment/IC@quail.com		
E-mail address: (to be used for future annual report notification		
For further information concerning this matter, please call:		
	557-9000	
Name of Person Arc	ea Code & Daytime Telephone Number	
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Registration Section Division of Corporations Division of Corporations 24	reet Address: egistration Section ivision of Corporations ne Centre of Tallahassee 115 N. Monroe Street, Suite 810 allahassee, FL 32303	
Enclosed is a check for the following amount:		
☑ \$25 Filing Fee ☐ \$55 Fil	ling Fee & Certified Copy	

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

I. Name of the limited liability company: ZAC	DEVELOPMENT LLC
1. Name of the limited liability company: 2. (a) 3495 LOCUST AVE.	(b) 3495 LOCUST AVE.
Principal office address of limited liability company:	Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS)	(Note: MAY BE POST OFFICE BOX)
WANTAGH, NEW YORK 1179	13 WANTAGH, NewYORK 1179
11/17/2021	M21000015473
3. Date of filing/registration in Florida	4. Document number
5. (a) RADER, ANDREW J.	
Registered Agent and Registered Office shown on the records of	of the Florida Dept. of State:
Registered Office Address (MUST BE FLORIDA STREE	T ADDRESS)
3111 N LANWERSITY ND	STF705 S 2
O AM COOLING	TAL
CORAL SPRINGS	1. 33065 SI F 7
	TAR I
(b)	
Enter name of NEW Registered Agent and/or NEW Register	ed Office address:
JAMES P. GITKIN	3: 12
NEW Registered Office Address:	
3864 SHERIDAN STY	<u> </u>
HOLLYMOOR	22021
_ TOLLYWOOD	1 <u>00001</u>
change or changes are made, the Florida street address of the agent will be identical. Or, in the case of a Florida limited	liability company, it is hereby confirmed that the change(s) of the limited liability company or as otherwise provided in the limited liability company.
	ZACHARY KAPLAN Printed or typed name of signee
Signature of a member or authorized representative of a member	Printed or typed name of signee
	gree to act in this capacity. I further agree to comply with the e performance of my duties, and I am familiar with and accept led for in Chapter 605. F.S. Or, if this document is being filed I hereby confirm that the limited liability company has been
Signature of Registered Agent	

FILING FEE: \$25.00